PART B - FEE(S) TRANSMITTAL

WASHINGTON OFFICE

23373

CUSTOMER NUMBER

SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

APPLICATION N	APPLICATION NO. FILIN		IG DATE FIRST NAMED			VENTOR ATTOR		EY DOCKET NO.		CONFIRMATION NO.	
10/584,836 10/23/		3/2006 Fumiki HARA			NO	Q95579			3457		
TITLE OF INVENTION: BAR-LIKE COSMETIC DELIVERING CONTAINER											
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATI FEE	ION PR	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	NO \$1510.00		\$300.00		\$0.00		\$1,810.00		06/02/2009	
EXAMINER			ART UNIT		CLASS-SUBCLASS						
David J. WALCZAK			3457	3457 401-09800		00					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363 2. For printing on the patent front page list 1 Sughrue Mion, PLLC											
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.											
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; I 03-02 or more recent) ATTACHED. Use of a Customer Number is required.					(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)											
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
OTSUKA PHARMACEUTICAL CO., LTD. Tokyo, Japan											
Please check the appropriate assignee category or categories (will not be printed on the patent): 🗆 Individual 🗹 Corporation or other private group entity 🗀 Government											
4a. The following fee(s) are submitted:				4b. Payme	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
☑ Issue Fee				☐ A check	☐ A check is enclosed.						
☑ Publication Fee (No.)	•	☐ Payment by credit card. Form 1310-2038 is attached.									
☐ Advance Order - # of Copies ☐ The Director is hereby authorized to charge the required fee(s), any deficiency overpayment, to Deposit Account Number 19-4880.											
☐ The USPTO is directed 19-4880. Please also credi										fees to Deposit Account No. count.	
5. Change in Entity Sta	atus (from status ind	icated above))								
a. Applicant claims										e 37 CFR 1.27(g)(2).	
										application identified above.	
NOTE: The Issue Fee party in interest as sho	and Publication Fee wn by the records of	(if required) f the United 8	will not be nates Paten	accepted from ar t and Trademark	office.	than the appl	icant; a regis	tered attorney	y or a	gent; or the assignee or other	
Authorized Signature				Lilian	Date			May	May 28, 2009		
Typed or Printed Nam	Typed or Printed Name Brett S. Sylvester				Registration No.			32,76	32,765		